

DECLARATION FOR PATENT APPLICATION

As below named inventors, we hereby declare that:

Our residence, post office address and citizenship are as stated below next to our names.

We believe the named inventors to be the original and first inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INSECT/ARTHROPOD TRAP

the specification of which:

[X] was filed on September 24, 2003, as Application No. 10/670,109, Confirmation No. 7166, bearing Attorney Docket No. M1077.70003US00.

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

We hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

<u>60/414916</u> (Application Number)	<u>September 30, 2002</u> (filing date)
<u>60/467677</u> (Application Number)	<u>May 2, 2003</u> (filing date)

The undersigned hereby appoints the following attorney(s) and/or agent(s) to prosecute this application and all related divisional, continuing, substitute, renewal, reissue, re-exam, and to conduct all business in the Patent and Trademark Office connected therewith:

☒ Practitioners at Customer Number:

23628

AND

☐ Practitioner(s) named below:

Name	Registration Number

☒ Direct all correspondence to the above-mentioned customer number

OR

☐ Correspondence address below:

ATTORNEY'S NAME					
FIRM NAME					
ADDRESS					
CITY		STATE		ZIP	
COUNTRY		TELEPHONE		FA	

Address all telephone calls to David Wolf at telephone no. (617) 720-3500.

We hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



9 Feb 2004

Inventor's signature

Date

Full name of first joint inventor: Dr. Thomas M. Kollars, Jr.
Citizenship: United States
Residence: 813 Fairwind Drive, Bel Air,
Maryland 21014
Post Office Address: 813 Fairwind Drive, Bel Air,
Maryland 21014

Inventor's signature

Date

Full name of second joint inventor: Dr. Edwin Masters
Citizenship: United States
Residence: 325 Kennedy Drive, Sikeston,
Missouri 63801
Post Office Address: 325 Kennedy Drive
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OR

☐ Correspondence address below:

ATTORNEY'S NAME					
FIRM NAME					
ADDRESS					
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COUNTRY		TELEPHONE		FA	

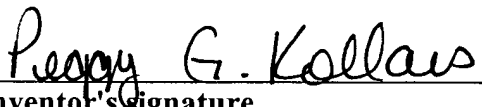
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Inventor's signature	Date
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Residence: 813 Fairwind Drive, Bel Air, Maryland 21014	
Post Office Address: 813 Fairwind Drive, Bel Air, Maryland 21014	

<i>Edwin J. Masters</i>	2/6/04
Inventor's signature	Date
Full name of first or joint inventor: Dr. Edwin Masters	
Citizenship: United States	
Residence: 325 Kennedy Drive, Sikeston, Missouri 63801	
Post Office Address: 325 Kennedy Drive Sikeston, Missouri 63801	

Inventor's signature	Date
Full name of third joint inventor: Jacqueline Masters	
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Post Office Address: 325 Kennedy Drive Sikeston, Missouri 63801	

Inventor's signature	Date
	9 Feb 2004
Full name of fourth joint inventor: Peggy G. Kollars	
Citizenship: United States	
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Jacqueline Masters 2/6/04

Inventor's signature	Date
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Inventor's signature	Date
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